Lower Extremity Amputations Related to Diabetes (NT-LEA)

According to the Centers for Disease Control and Prevention (CDC), diabetes is the leading cause of non-traumatic lower extremity amputations (NT-LEA).

In Virginia, in 2009, the age-adjusted rate for NT-LEA was 2.7 per 10,000 population, among persons with any mention of diabetes diagnosis.

Because a diabetes diagnosis may also occur in one of 18 diagnosis fields, limiting analyses to primary diagnoses underestimates the burden of diabetes-related hospital stays. About half of persons with diabetes who had a non-traumatic lower extremity amputation in 2009 had diabetes listed in the primary diagnosis field. The age-adjusted rate of NT-LEA with a <u>primary diabetes diagnosis</u> was 1.4 per 10,000.

Diabetes-related NT-LEA hospital discharges, Virginia 2009

	Any diabetes diagnosis	Primary diabetes diagnosis	
Total NT-LEA discharges with diabetes	2,160	1,138	
Hospitalization rate	2.7 per 10,000	1.4 per 10,000	
Total charges	\$128.9 million	\$60.6 million	
Average cost per discharge	\$59,670	\$53,222	
Average length of stay	10.7 days	10.1 days	

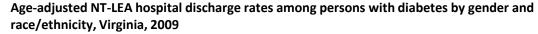
Virginia NT-LEA hospital discharges with a diabetes diagnosis, 2009

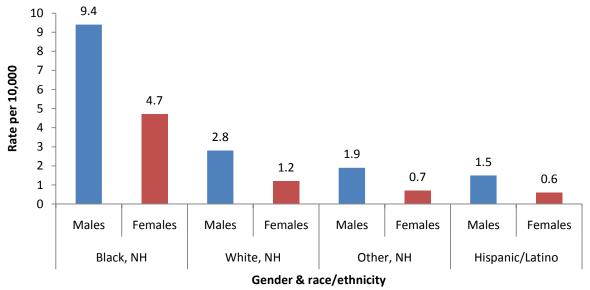
	Any diagnosis		<u>Primary diagnosis</u>	
	Total Discharges	Rate per 10,000	Total discharges	Rate per 10,000
Gender				
Female	772 (35.7%)	1.7	373 (32.8%)	0.8
Male	1,388 (64.3%)	3.7	765 (67.2%)	2.0
Race/ethnicity				
White, NH	1,182 (54.6%)	1.9	641 (56.3%)	1.0
Black, NH	902 (41.8%)	6.7	449 (39.5%)	3.2
Hispanic/Latino	32 (1.5%)	1.0	21 (1.9%)	0.5
Other, NH	44 (2.0%)	1.2	27 (2.4%)	0.7
Age group				
Under 25	† (<1%)	< 0.1	† (<1%)	< 0.1
25-34 Years	26 (1.2%)	0.3	21 (1.9%)	0.2
35-44 Years	127 (5.9%)	1.9	92 (8.1%)	1.0
45-54 Years	380 (17.6%)	4.4	246 (21.6%)	2.8
55-64 Years	589 (27.3%)	5.7	310 (27.2%)	4.6
65-74 Years	520 (24.1%)	6.5	248 (21.8%)	6.7
75-84	385 (17.8%)	12.4	173 (15.2%)	5.6
85+	131 (6.1%)	11.0	47 (4.1%)	3.9
Total	2,160	2.7	1,138	1.4

Source: Virginia Health Information, Inc. Hospital Discharge Dataset, 2009.

Data notes: ICD-9 codes were as follows: any diagnosis diabetes (250.xx) and NT-LEA procedure (84.10-84.19). Rates are age-adjusted based on 2000 U.S. Census data and are per 10,000 population. †Count is too low to report.

Updated by the Virginia Department of Health, Office of Family Health Services, Diabetes Prevention and Control Project on 7/2011. For more information, visit http://www.vahealth.org/cdpc/diabetes/.





Source: Virginia Health Information, Inc. Hospital Discharge Dataset, 2009. Data notes: ICD-9 codes were as follows: any diagnosis diabetes (250.x) and NT-LEA procedure (84.10-84.19). Rates are age-adjusted based on 2000 U.S. Census data and are per 10,000 population.

• Non-Hispanic (NH) black males have the highest diabetes-related NT-LEA rates, followed by NH black females. Males, total, have higher rates (3.7/10,000) than females, total (1.7/10,000), and rates among males are higher in each racial/ethnic group.

Healthy People 2020 Objective:

(D-3) Reduce the rate of lower extremity amputations in persons with diagnosed diabetes.

Sources: CDC - <u>National Diabetes Fact Sheet</u>, 2011; <u>www.cdc.gov/diabetes</u>; Virginia Health Information, Inc. Hospital Discharge Dataset, 2009.